

TC-992

1c903 U.S. PTO

ISSUE SLIP STAPLE AREA (for additional cross references)

SECTION		ID NO.	DATE
FEE DETERMINATION			6/18
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	12	06/08/01
FORMALITY REVIEW	<i>[Signature]</i>	920	08/09/01
RESPONSE FORMALITY REVIEW	T2	943	03/11/02

INDEX OF CLAIMS

- | | | | |
|-------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| (Through numeral) | Canceled | A | Appeal |
| + | Restricted | O | Objected |

Claim	Date
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Claim	Date
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Claim	Date
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50-859
5/12/02

If more than 150 claims or 10 actions
staple additional sheet here

457-1015